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theck if this is:
An amended filing
A supplement showing postpetition chapter 13 income as of the following date:
MM / DD/ YYYY
12/1

supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	t 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filling spouse
	If you have more than one job, attach a separate page with information about additional employers.	e page with Employment status	■ Employed	■ Employed
			☐ Not employed	☐ Not employed
		Occupation	Truck Driver	
	Include part-time, seasonal, or self-employed work.	Employer's name	J&S Anand Inc	
	Occupation may include student or homemaker, if it applies.		1st FI Ste 100 Basking Ridge, NJ 07920	
		How long employed to	here? 5 years	

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

0.00

0.00

0.00

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 8,238.46 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 3. 0.00 +\$ Calculate gross Income. Add line 2 + line 3. 8,238.46

Schedule I: Your Income Official Form 106I page 1

Deb	tor 1	Rafael Guariomex Campos		Case number (if known)	19-14071		
				For Debtor 1	For Debtor non-filing s	spouse	
	Cop	y line 4 here	4.	\$8,238.46_	\$	0.00	
5.	List	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$ 1,581.55	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$ 0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$ 640.40 \$ 206.61	\$	0.00	
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.	\$ <u>206.61</u> \$ 363.35	\$ \$	0.00	
	5f.	Domestic support obligations	5f.	\$ 0.00	\$	0.00	
	5g.	Union dues	5g.	\$ 0.00	\$	0.00	
	5h.	Other deductions. Specify:	_ 5h.+		+ \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$2,791.91	\$	0.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 5,446.55	\$	0.00	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$ 0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$ 0.00	\$	0.00	
	8c. 8d. 8e.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security	8c. 8d. 8e.	\$ 0.00 \$ 0.00 \$ 0.00	\$ \$	0.00 0.00 0.00	
	8f.	Other government assistance that you regularly receive	00.	Ψ	Ψ	0.00	
	01.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$ 0.00	\$	0.00	
	8g.	Pension or retirement income	_ 8g.	\$ 0.00	\$	0.00	
	8h.	Other monthly income. Specify: Pro-rated tax refund	_ 8h.+	\$ 155.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$155.00	\$	0.00	
10	Cald	culate monthly income. Add line 7 + line 9.	10. \$	5,601.55 + \$	0.00	= \$	5,601.55
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	σ. Ψ	,,,,,	0.00		3,001.33
11.	Stat Inclu	e all other regular contributions to the expenses that you list in <i>Schedule</i> and contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	depend	• •			0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$							
13.	Do y	you expect an increase or decrease within the year after you file this form?	•			Combine	
		Yes. Explain: Debtor's Non-Filing Spouse quit her job several n time, she is not sure when she will be returning to needs to be home to assist her children with hybr	o wor	k as she has medi			

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